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APPLICANTS
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**** CONTINUING DATA *******
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**** FOREIGN APPLICATIONS *******
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**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ****

Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance MP Initials	STATE OR COUNTRY UNITED KINGDOM	SHEETS DRAWINGS 3	TOTAL CLAIMS 78	INDEPENDENT CLAIMS 7
35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
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TITLE
 Delivery of neutron capture elements for neutron capture therapy

FILING FEE RECEIVED 2300	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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